## U. S. DEPARTMENT OF LABOR

## Employees' Compensation Appeals Board

In the Matter of DAVID W. WIELAND <u>and</u> U.S. COAST GUARD, AIRCRAFT REPAIR & SUPPLY CENTER, Elizabeth City, NC

Docket No. 02-738; Submitted on the Record; Issued January 9, 2003

**DECISION** and **ORDER** 

Before ALEC J. KOROMILAS, COLLEEN DUFFY KIKO, WILLIE T.C. THOMAS

The issue is whether appellant has met his burden of proof in establishing that his prostatitis is due to heavy lifting on February 14, 2001.

Appellant, a 45-year-old materials handler, filed a notice of traumatic injury on March 6, 2001 alleging that on February 14, 2001 he experienced severe groin pain while stocking and pulling heavy boxes of aircraft parts and hazardous material and that when he returned to work on February 23, 2001 he "reinjured" his groin. The Office of Workers' Compensation Programs requested additional factual and medical evidence by letter dated March 16, 2001 but none was provided. By decision dated May 2, 2001, the Office denied appellant's claim finding that he failed to submit the necessary medical evidence to establish a causal relationship between his diagnosed condition and his accepted employment injury.<sup>1</sup>

The Board finds the case not in posture for decision.

In order to determine whether an employee actually sustained an injury in the performance of duty, the Office begins with an analysis of whether fact of injury has been established. Generally, fact of injury consists of two components, which must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident, which is alleged to have occurred.<sup>2</sup> The second component is whether the employment incident caused a personal injury and generally can be established only by medical evidence. To establish a causal relationship between the condition, as well as any attendant disability, claimed and the employment event or incident, the employee

<sup>&</sup>lt;sup>1</sup> Following the Office's May 2, 2001 decision, appellant submitted additional new evidence. As the Office did not consider this evidence in reaching a final decision, the Board will not review this evidence for the first time on appeal. 20 C.F.R. § 501.2(c). This decision does not preclude appellant from submitting the additional evidence to the Office with a request for reconsideration.

<sup>&</sup>lt;sup>2</sup> Elaine Pendleton, 40 ECAB 1143 (1989).

must submit rationalized medical opinion evidence, based on a complete factual and medical background, supporting such a causal relationship.<sup>3</sup> Rationalized medical opinion evidence is medical evidence which includes a physician's rationalized opinion on the issue of whether there is a causal relationship between the claimant's diagnosed condition and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant. The weight of the medical evidence is determined by its reliability, its probative value, its convincing quality, the care of analysis manifested and the medical rationale expressed in support of the physician's opinion.<sup>4</sup>

The Office accepted that appellant pulled heavy boxes of aircraft parts on February 14, 2001 and that he, therefore, established the first prong of the fact of injury test. However, the Office found that the medical evidence was not sufficient to establish that appellant developed the diagnosed condition of prostatitis due to this activity.

Dr. J. Chris Reynolds, a urologist, submitted a report dated February 16, 2001 diagnosing probable prostatitis. On March 5, 2001 Dr. Reynolds stated that appellant was still having some lower tract irritative symptoms of a sensation of needing to void and concluded, "It does seem to be related or at least aggravated by lifting at work." He in a report dated March 21, 2002, stated that appellant experienced groin pain with lifting. Dr. Reynolds concluded:

"I suspect that due to incomplete emptying, his pain is related to the fact that he is try[ing] to lift with a full bladder. He describes needing to void approximately every 30 minutes at work but only voiding a small amount. Most likely, this is causing reflux of urine into the ejaculatory duct and causing a chemical inflammation of the prostate and vas deferens."

In his initial report, Dr. Reynolds noted appellant's employment duty of lifting at work and provided diagnoses of prostatitis and appellant's inability to completely void his bladder. He offered the qualified opinion that appellant's condition was related to or aggravated by lifting at work. However, Dr. Reynolds failed to provide any medical reasoning explaining how or why appellant's diagnosed conditions would be caused or aggravated by his accepted employment activity. In his later report, he attributed appellant's prostatitis to his inability to fully void. Dr. Reynolds opined that because appellant is unable to completely empty his bladder he experiences groin pain when attempting heavy lifting. These reports contain a history of injury, diagnosis and an opinion that appellant's condition was exacerbated by the accepted employment activity. While these reports are not sufficient to meet appellant's burden of proof, they do raise an uncontroverted inference of causal relation between appellant's accepted employment duty

<sup>&</sup>lt;sup>3</sup> See 20 C.F.R. § 10.110(a); John M. Tornello, 35 ECAB 234 (1983).

<sup>&</sup>lt;sup>4</sup> James Mack, 43 ECAB 321 (1991).

and his diagnosed condition and are sufficient to require the Office to undertake further development of appellant's claim.<sup>5</sup>

On remand the Office should prepare a statement of accepted facts and list of questions and refer appellant to an appropriate physician to determine the causal relationship between his diagnosed conditions and his accepted employment duties. After this and such other development as the Office deems necessary, the Office should issue an appropriate decision.

The May 2, 2001 decision of the Office of Workers' Compensation Programs is hereby set aside and remanded for further development consistent with this opinion of the Board.

Dated, Washington, DC January 9, 2003

> Alec J. Koromilas Member

Colleen Duffy Kiko Member

Willie T.C. Thomas Alternate Member

<sup>&</sup>lt;sup>5</sup> John J. Carlone, 41 ECAB 354, 358-60 (1989).